	to refer to a debtor filing alone. A married couple m		
Voluntary Petition 1	or Individuals Filing fo	r Bankruptcy	12/17
Official Form 101			
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	19 APR -5 PI RICHARD UC CLERK OF C U.S. BANKRUPTO □ で計画を対する話。 amended filing	Y COURT ©àHO
United States Bankruptcy Court for the: Southern District of Ohio		19 APR -5 P	M 3: 03 -
Fill in this information to identify your case	9 .	FILE	ED

joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)
. Your full name		
Write the name that is on y	^{our} Tawanda	
government-issued picture	First name	First name
identification (for example, vour driver's license or	LaShawn	
passport).	Middle name	Middle name
Bring your picture	Luckey	
identification to your meetir with the trustee.	g Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
. All other names you	Tawanda	
have used in the last 8	First name	First name
years	L	
include your married or	Middle name	Middle name
maiden names.	Luckey	
	Last name	Last name
	Tawanda	
	First name	First name
	Middle name	Middle name
	Luckey	
	Last name	Last name
. Only the last 4 digits of	xxx - xx - <u>3 4 8 4</u>	xxx - xx
your Social Security number or federal	OR	OR
Individual Taxpayer		
Identification number	9 xx - xx	9 xx - xx

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De	Postor 1 Tawanda LaS	hawn Luckey ne Last Nume	Case number (# known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Businese name
	Include trade names and		
	doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5 .	Where you live		If Debtor 2 lives at a different address:
		5410 Aster Park Dr	
		Number Street	Number Street
		#707	
		Wester Chester Oh 45011	
		City State ZIP Code	City State ZIP Code
		Butler	
		County	County
		If your malling address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City Stake ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		l have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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De	totor 1 Tawanda LaS	<u>hawn L</u>	ucke	<u>Y</u>		Case number (#	known)		
Pa	art 2: Tell the Court Abou	rt Your B	ankruj	ptcy Case					
7.	The chapter of the						1 U.S.C. § 342(b) for Individuals Filing		
	Bankruptcy Code you are choosing to file	for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. 2 Chapter 7							
	under	•							
		☐ Cha _l							
		☐ Char							
		☐ Cha _l	oter 13						
8.	How you will pay the fee	local your subr with	court f self, you nitting y a pre-c	for more details about he ou may pay with cash, ca your payment on your be printed address.	ow you nashier's dehalf, you	nay pay. Typica check, or money ur attomey may	neck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check ption, sign and attach the		
							ents (Official Form 103A).		
		By la less pay t	w, a ju than 15 the fee	idge may, but is not requ 50% of the official pover	ired to, ty line th hoose th	waive your fee, at applies to you nis option, you n	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.		
9.	Have you filed for	□ No							
	bankruptcy within the last 8 years?	2 Yes.	District	southern ohio	When	04/29/2016	Case number 16-11656		
	last o years.					MM / DD / YYYY			
			District		When	MM / DD / YYYY	_ Case number		
			District		When	MM / DD / YYYY	Case number		
						MM/ DD/ TTTT			
10.	Are any bankruptcy	☑ No							
	cases pending or being filed by a spouse who is		Debtor				Relationship to you		
	not filing this case with				When		Case number, if known		
	you, or by a business partner, or by an affiliate?					MM/DD/YYYY			
			Debtor				Relationship to you		
			District		When	MM / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	No. Yes.	☑ No.	our landlord obtained an evi . Go to line 12.	About an	-	? t Against You (Form 101A) and file it as		

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ebtor 1 Tawanda LaS	hawn	Luckey Last Name	Case nu	mber (# krown)	<u> </u>	
art 3: Report About Any L	lucinos	ses You Own as a So	Ne Proprietor			
2. Are you a sole proprietor of any full- or part-time	No.	Go to Part 4.				
business?	☐ Yes	. Name and location of bu	usiness			
A sole proprietorship is a						
business you operate as an individual, and is not a separate legal entity such as		Name of business, if any				
a corporation, partnership, or LLC.		Number Street				
If you have more than one						
sole proprietorship, use a separate sheet and attach it						
to this petition.		City		State	ZIP Code	
		Check the appropriate b	ox to describe your business:			
		☐ Health Care Busines	ss (as defined in 11 U.S.C. § 10)1(27A))		
		☐ Single Asset Real E	state (as defined in 11 U.S.C. §	101(51B))		
		☐ Stockbroker (as defi	ned in 11 U.S.C. § 101(53A))			
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6	S))		
		☐ None of the above				
are you a small business debtor? For a definition of small	No.	I am not filing under Cha		·		
business debtor, see 11 U.S.C. § 101(51D).	Ŭ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
	☐ Yes.	I am filing under Chapte Bankruptcy Code.	r 11 and I am a small business	debtor acc	ording to the definition in the	
art 4: Report if You Own	or Have	Any Hazardous Prop	erty or Any Property That	: Needs i	mmediate Attention	
. Do you own or have any	2 No		· · · · · · · · · · · · · · · · · · ·			
property that poses or is alleged to pose a threat	☐ Yes.	What is the hazard?				
of imminent and						
identifiable hazard to public health or safety?						
Or do you own any						
property that needs immediate attention?		If immediate attention i	s needed, why is it needed?			
For example, do you own						
perishable goods, or livestock that must be fed, or a building that needs urgent repairs?						
- ·		Where is the property?				
		, ,, ,	Number Street			
			City		State ZIP Code	

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n	6	н	1	r	1

Tawanda LaShawn Luckey

Case number (# Innown)		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about	
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making

rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Li Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	req	wired	to	receive	а	briefing	about
crod	it c	auns	alina	h	ASIIEA	٠f	,	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:19-bk-11222 Doc 1 Filed 04/05/19 Entered 04/05/19 15:19:29 Desc Main Document Page 6 of 61

Debtor 1 Tawanda LaS	hawn Luckey	Case number (if knx	Case number (# known)				
Part 6: Answer These Que:	stions for Reporting Purpo	ses					
16. What kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
you have?	No. Go to line 16b. Yes. Go to line 17.						
	16b. Are your debts prima money for a business or i	arily business debts? Business debts investment or through the operation of the	are debts that you incurred to obtain business or investment.				
	No. Go to line 16c. Yes. Go to line 17.						
	16c. State the type of debts yo	ou owe that are not consumer debts or bus	siness debts.				
17. Are you filing under Chapter 7?	☐ No. 1 am not filing under 0	Chapter 7. Go to line 18.					
Do you estimate that after	2 Yes. I am filing under Chap	ter 7. Do you estimate that after any exer ses are paid that funds will be available to	npt property is excluded and				
any exempt property is excluded and	☑ No	oce are paid that lands will be available to	distribute to unsecured evolutions.				
administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes						
18. How many creditors do you estimate that you	☑ 1-49 □ 50-99	1,000-5,000 5,001-10,000	25,001-50,000 50,001-100,000				
owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000				
19. How much do you estimate your assets to	\$0-\$50,000 \$50,001-\$100,000	\$1,000,001-\$10 million \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion				
be worth?	\$100,001-\$500,000 \$500,001-\$1 million	☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million	□ \$10,000,000,001-\$50 billion □ More than \$50 billion				
20. How much do you	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion				
estimate your liabilities to be?	\$50,001-\$100,000 \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion				
	\$500,001-\$300,000	\$100,000,001-\$500 million	☐ More than \$50 billion				
Part 7: Sign Below							
For you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and				
		chapter 7, I am aware that I may proceed, I understand the relief available under ea	• • • • • • • • • • • • • • • • • • • •				
		nd I did not pay or agree to pay someone of and read the notice required by 11 U.S.C					
	I understand making a false st	sult in fines up to \$250,000, or imprisonme	money or property by fraud in connection				
	* mont	- Kunky *					
	Signature of Debtor 1	 	e of Debtor 2				
	Executed on	Executed	MM / DD /YYYY				

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Debtor 1 Tawanda LaS	hawn Luckey	Case number (i inven)_			
For your attorney, if you are represented by one If you are not represented by an attorney, you do not	I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of available under each chapter for which the pthe notice required by 11 U.S.C. § 342(b) ar knowledge after an inquiry that the information	nd have ex hat I have ()(D) applie	plained the relief delivered to the d es, certify that I ha	ebtor(s)	
need to file this page.	Signature of Attorney for Debtor	Date	MM /	DD /YYYY	_
	Printed name Firm name Number Street				
	City	State	ZIP Code		
	Contact phone	Email address	•		
	Bar number	State	-		

	Document	Page 8 01 61				
Debtor 1 Tawanda LaSha First Name Middle Name	awn Luckey Lad Name	Case number (Fluorin)				
For you if you are filing this bankruptcy without an attorney	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.					
If you are represented by an attorney, you do not need to file this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
	court. Even if you plan to pay a pa in your schedules. If you do not lis property or properly claim it as exe also deny you a discharge of all yo case, such as destroying or hiding cases are randomly audited to det	d debts in the schedules that you are required to file with the articular debt outside of your bankruptcy, you must list that debt st a debt, the debt may not be discharged. If you do not list tempt, you may not be able to keep the property. The judge can your debts if you do something dishonest in your bankruptcy g property, falsifying records, or lying. Individual bankruptcy termine if debtors have been accurate, truthful, and complete.				

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

be familial with any state exemption laws that appry.	
Are you aware that filing for bankruptcy is a serious a consequences?	ction with long-term financial and legal
☐ No ☑ Yes	
Are you aware that bankruptcy fraud is a serious crim inaccurate or incomplete, you could be fined or impris	• • •
□ No □ Yes	
Did you pay or agree to pay someone who is not an a	attorney to help you fill out your bankruptcy forms?
Yes. Name of Person Donna Harper	
Attach Bankruptcy Petition Preparer's Notice, D	eclaration, and Signature (Omicial Form 119).
By/signing here, I acknowledge that I understand the	risks involved in filing without an attorney 1
have read and understood this notice, and I am aware	•
attorney may cause me to lose my rights or property i	
c (wonds frames).	×
Signature of Debtor 1	Signature of Debtor 2
Date S 12 - 79	Date MM / DD / YYYY
	MMM / DD / TTTT
Contact phone (513) 212-7704	Contact phone
Cell phone	Cell phone
Email address	Email address

Debtor 1	Tawanda First Name	LaShawn Middle Name	Luckey Last Name	
Debtor 2 (Spouse, if filing)	Frank	Middle Name	Last Name	
UNITED STATES	sanio upicy Countror i	the: Southern District of	Onio	
Case number				

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the Information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

art 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	s 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	. \$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$11,950.00
1c. Copy line 63, Total of all property on Schedule A/B	s11,950.00
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	. \$10,095.96
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	s 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. • • • • • • • • • • • • • • • • • • •
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 49,888.73
Your total liabilities	\$59,984.69
Part 3: Summarize Your Income and Expenses	
s. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	. \$2,194.32
i. Schedule J: Your Expenses (Official Form 106J)	

☐ Check if this is an amended filing

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Debto	or 1 Tawand First Name	A Middle Name	LaShawn Last Name	Luckey	Case number (if known)		
Par	t 4: Answer 1	hese Ques	tions for Admini	strative and St	atistical Records		
6.	Are you filing for	oankruptcy u	nder Chapters 7, 1	1, or 13?			
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 						
7. V	/hat kind of debt	do you have?	•				
6	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
C	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
			rrent Monthly Inco 122B Line 11; OR , I		tal current monthly income from Official 14.	\$2,645.30	
9. C	o. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:						
					Total claim		
	From Part 4 on S	chedule E/F,	copy the following	g:			
9	a. Domestic suppo	rt obligations	(Copy line 6a.)		s0.	00	

9a. Domestic support obligations (Copy line 6a.)	\$ _	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	s	0.00
9d. Student loans. (Copy line 6f.)	s	38,297.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ s	0.00
9g. Total. Add lines 9a through 9f.	\$	38,297.00

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END STATE					
FIII IN UA	nis information to identify	your case and th	is filing:		
Debtor 1	Tawanda	LaShawn	Luckey		
Dahter 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	Southern District of	of Ohio		
Case nun	nber				
				(Check if this is an
					amended filing
Offic	ial Form 106A/l	<u>B_</u>			
Sch	nedule A/B:	Propert	t v		12/15
			s. List an asset only once. If an asset fits in		
respons write you	sible for supplying correctour name and case number Describe Each Resident	t information. If ner (if known). Ans	lete and accurate as possible. If two married nore space is needed, attach a separate shee wer every question. , Land, or Other Real Estate You Own or the common state of the common sta	t to this form. On the top of	
	o. Go to Part 2.	or equitable diteri	est iii diiy residence, oduding, idiid, or samad	property:	
	o. Go to Part 2. es. Where is the property?				
	co. Timolo io bio proporty.		What is the property? Check all that apply.	Do not deduct secured of	laims or exemptions. Put
			Single-family home	the amount of any secure	ed claims on Schedule D: ims Secured by Property.
1.1.	Street address, if available, o	r other description	Duplex or multi-unit building Condominium or cooperative		
			Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
			- 🔲 Land	s	\$
			☐ Investment property		
	City	State ZIP Code	- Timeshare	Describe the nature interest (such as fee	•
			Other	— the entireties, or a life	fe estate), if known.
			Who has an interest in the property? Chec	ok one.	
			Debtor 1 only Debtor 2 only		
	County		Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about	this item, such as local	
If you	own or have more than on	e liet here:	property identification number:		
,00	own or nave more than on	o, not note.	What is the property? Check all that apply.	Do not deduct secured d	nime or avamations. But
			☐ Single-family home	the amount of any secure	ad claims on Schedule D:
1.2.	Street address, if available, or	r other description	Duplex or multi-unit building	Creditors Who Have Clai	ms Secured by Property.
		•	Condominium or cooperative Manufactured or mobile home	Current value of the	
			Land	entire property?	portion you own?
			☐ Investment property	•	\$
	City	State ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee	
	Oily	211 0000	Other	— the entireties, or a lif	
			Who has an interest in the property? Check Debtor 1 only	one	
	County		Debtor 2 only		
	County		Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
			At least one of the debtors and another	(see instructions)	1 5-5-4
			Other information you wish to add about the	nis item, such as local	

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Debtor 1	Tawanda	LaShawn	Luckey Case nur	Tiber (if Imaum)	
	First Name Midd	le Name Last Name			
1.3 .	Street address, if available	e, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured di the amount of any secure Creditors Who Have Clai	ad claims on Schedule D:
			Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
			 ■ Manufactured or mobile home ■ Land 	\$	\$
	City	State ZIP Code	☐ investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check	k one.	
	County		Debtor 1 only		
	•		Debtor 2 only	Check if this is co	mmunity property
			Debtor 1 and Debtor 2 only At least one of the debtors and another	(see instructions)	minumey property
			Other information you wish to add about t property identification number:		
2. Add t	he dollar value of the	portion you own for a	ll of your entries from Part 1, including any	entries for pages	• 0.00
		•	nere		\$
ou own	that someone else drive	es. If you lease a vehicle	et in any vehicles, whether they are registente, also report it on Schedule G: Executory Conf., motorcycles	_	s
U N Ø Ye	-				
	Maka	chrysler	Who has an interest in the property? Check	one. Do not deduct secured cla	sime or exemptions. But
3.1.	Make:	sebring	Debtor 1 only	the amount of any secure	d claims on Schedule D:
	Model:	2010	Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	151837	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	101001	At least one of the debtors and another	onare property.	pordon you own.
	Other information:		Check if this is community property (se instructions)	se \$8,750.00	\$
if you	own or have more than	one, describe here:			
2.0	Maka:		Who has an interest in the property? Check	one. Do not deduct secured cla	ims or exemptions. Due
3.2.	Make:		Debtor 1 only	the amount of any secure	d claims on Schedule D:
	Model:		Debtor 2 only	Creditors Who Have Clair	, , ,
	Year:		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:		At least one of the debtors and another	ende property :	Portion you own?
	Other information:		☐ Check if this is community property (se instructions)	s	\$

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Debtor 1	Tawanda First Name Middle N	LaShawn lame Last Name	Luckey	Case number (#	nom)	
3.3.	Make:		Who has an interest in the	he property? Check one.	Do not deduct secured cla	
	Model: _		Debtor 1 only		the amount of any secure Creditors Who Have Clair	
	Year		Debtor 2 only			
	_		Debtor 1 and Debtor 2 o	•	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage: _		At least one of the debto	ors and another	chare property.	portion you own.
	Other information:		Check if this is comminstructions)	nunity property (see	s	\$
	A A a local		Who has an interest in the	ne property? Check one		
3.4.	Make: _		Debtor 1 only	o property : oncox and.	Do not deduct secured cla the amount of any secure	
	Model:		_		Creditors Who Have Clair	
	Year: _		Debtor 2 only		Current value of the	Current value of the
	Approximate mileage:		Debtor 1 and Debtor 2 or	•	entire property?	portion you own?
			At least one of the debto	rs and another		•
	Other information:		Check if this is comminstructions)	nunity property (see	\$	\$
4.1.	Make:	_	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or		Do not deduct secured cla the amount of any secure Creditors Who Have Clain	claims on Schedule D:
	Other information:		At least one of the debtor		Current value of the entire property?	Current value of the portion you own?
			☐ Check if this is comminstructions)	unity property (see	s	\$
If you	own or have more than or	ne, list here:				
42	Make:		Who has an interest in th	e property? Check one.	Do not deduct secured clai	ims or exemptions. Put
			Debtor 1 only		the amount of any secured	claims on Schedule D:
	Model:		Debtor 2 only		Creditors Who Have Claim	is Secured by Property.
	Year:		Debtor 1 and Debtor 2 or	nly	Current value of the	Current value of the
	Other information:		At least one of the debtor	s and another	entire property?	portion you own?
			Check if this is corrend instructions)	unity property (see	\$	\$
					r	
Add ti	ne dollar value of the po	rtion you own for all	l of your entries from Part	2, including any entries	for pages	8,750.00
you ha	ave attached for Part 2. \	Write that number he	ere			, .,

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LaShawn Tawanda Luckey Debtor 1 Case number (# known)

Describe Your Personal and Household Items Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe...... household goods, furnishings 1,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... television, canon printer, dell laptop samsung cell phone 750.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles Mo No Yes. Describe...... 0.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☑ No ☐ Yes. Describe...... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☑ No Yes. Describe..... 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... clothes, shoes 300.00 12. Jewelry Examples: Everyday jewelry, costurne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☑ No Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☑ No Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

Official Form 106A/B Schedule A/B: Property page 4

for Part 3. Write that number here ...

2,050.00

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Debtor 1	Tawanda	LaShawn	Luckey	Case number (# Inoun)	
	First Name	Middle Name Last Name		Case Hall Best (I Naces)	
Part 4:	Describe Yo	ur Financial Assets			
_ کمسے				·	
Do you ow	n or have any	legal or equitable interest in	any of the following?		Current value of the
			-		portion you own?
					Do not deduct secured claims or exemptions.
					di danyana.
16. Cash					
Example	es: Money you l	have in your wallet, in your hor	ne, in a safe deposit box, a	nd on hand when you file your petition	
.					
☑ No					
☐ Yes.				Cash:	\$0.00
17. Deposit	s of money				
Example				shares in credit unions, brokerage house	es,
	and other si	milar institutions. If you have n	nultiple accounts with the sa	ime institution, list each.	
☐ No					
Yes.			Institution name:		
		17.1. Checking account	bank of america		\$ 300.00
					_
		17.2. Checking account			_ \$
		17.3. Savings account:			_ \$
		47.4 Sovings account			
		17.4. Savings account			_ \$
		17.5. Certificates of deposit:			_ \$
		17.6. Other financial account:			_ \$
					_ 4
		17.7. Other financial account:			- \$ <u></u>
		17.8. Other financial account:			- \$ <u></u>
		17.9. Other financial account:			- \$
a Danda -		as wellishe traded stocks			
•	_	or publicly traded stocks investment accounts with brok	orago firmo, monov madrot	accounts	
	s. Duna tunas,	invesiment accounts with blok	erage iimis, money market	accounts	
Ø No					
☐ Yes.		Institution or issuer name:			
					_ \$
					_ \$
					_ \$
19. Non-put	blicly traded st	ock and interests in incomo	rated and unincorporated	businesses, including an interest in	
-	-	nd joint venture	•		
ZÍ No		Name of entity:		% of ownership:	
	Give specific	· wite or criticity.		U07	
	mation about				\$
them				0% _%	•

0%

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Debtor 1	Tawanda	LaShawn	Luckey	Case number (# Incom)	
	First Name	Middle Name Last	Name		
20 Gayes	nment and com-	acts bands and other	posstickle and non sesse	tiable instruments	
Negotia	able instruments i	include personal checks		ory notes, and money orders.	
Non-ne	egotiable instrume	ents are those you cann	ot transfer to someone by s	igning or delivering them.	
Ø No					
	s. Give specific rmation about	issuer name:			
ther	m				\$
					\$
					\$
21 Reticed	nent or pension	accounts			
	•		(k), 403(b), thrift savings ac	counts, or other pension or profit-sharing plans	
🗹 No					
	s. List each	Type of account:	nstitution name:		
acc	ount separatery.		isutabon name.		
		401(k) or similar plan: _			\$
		Pension plan: _			\$
		IRA:			\$
		Retirement account: _			\$
		Keogh: _			\$
		Additional account: _			\$
		Additional account: _			s
22 Securit	y deposits and p	neansymente			
			le so that you may continue	service or use from a company	
	les: Agreements v nies, or others	with landlords, prepaid r	ent, public utilities (electric,	gas, water), telecommunications	
☑ No					
_	i	lactit	rtion name or individual:		
- 103	·	Electric:	non name of individual.		•
		Gas:			\$
		Heating oil:			*
		Security deposit on rental	_{unit:} yes		\$850.00
		Prepaid rent:			\$S
		Telephone:			
		Water:			\$ \$
		Rented furniture:			\$
		Other:			\$
					₹
23. Annuitie	es (A contract for	a periodic payment of r	noney to you, either for life	or for a number of years)	
V No	-			- •	
		Issuer name and descrip	otion:		
					s
					\$

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Debtor 1		LaShawn	Luckey	Case number (# known)	
	ests in an education l I.S.C. §§ 530(b)(1), 529	•	ualified ABLE program, o	or under a qualified state tuition program.	
☑ •	No Yes		_		
	165	Institution name and d	escription. Separately file	the records of any interests.11 U.S.C. § 521(c):
					\$
					\$
					>
	ts, equitable or future cisable for your bene		her than anything listed	in line 1), and rights or powers	
Z v					
	es. Give specific nformation about them.				\$
-					
		marks, trade secrets, an names, websites, proceed	• •	•	
Z N	No	•	-		
	es. Give specific nformation about them.				\$
		other general intangible exclusive licenses, coope		s, liquor licenses, professional licenses	
Z N			•	,,,	
	es. Give specific				\$
Money (or property owed to y	ou?			Current value of the portion you own? Do not deduct seared claims or exemptions.
28. Tax r	refunds owed to you				
Z v					
LI Y	es. Give specific inform about them, includi			Federal:	5
	you already filed th and the tax years.	e returns		State:	
	and the tax years.			Local: S	-
Exan	•	sum alimony, spousal su	pport, child support, mainte	enance, divorce settlement, property settlemen	nt
	lo 'es. Give specific inform	nation			
	os. Olde specific illioni			Alimony:	\$
				Maintenance:	\$
				Support	\$
				Divorce settlement:	\$
				Property settlement	\$
	er amounts someone o inples: Unpaid wages, d Social Security b		nts, disability benefits, sick made to someone else	pay, vacation pay, workers' compensation,	
Z N					
□ Y	es. Give specific inform	nation			

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D	ebtor 1	lawanda	LaShawn	Luckey	Case number (if lorentin)	
		First Name Middle	: Name Last Name			
31.		in insurance polici				
	Examples:	Health, disability, o	or life insurance; health :	savings account (HSA);	credit, homeowner's, or renter's insurance	
	🗹 No					
		lame the insurance f each policy and lis		пате:	Beneficiary:	Surrender or refund value:
						\$
						\$
						•
						\$
32	Any inter	est in property tha	t is due you from som	none who has died		
	If you are t		living trust, expect proce		ce policy, or are currently entitled to receive	
	☑ No					
	☐ Yes. G	ive specific informa	ntion			
						\$
33 .	Claims ag	ainst third parties	, whether or not you h	ave filed a lawsuit or r	made a demand for payment	
	Examples:	Accidents, employ	ment disputes, insuranc	e claims, or rights to su	e	
	☑ No					
	Yes. D	escribe each claim.				
						\$
34	Other con	tingent and unliqu	idated claims of every	nature, including cou	interclaims of the debtor and rights	
.	to set off	claims	induced cidimic of every	nature, morading coa	intercolating of the debter and rights	
	No No					
	☐ Yes D	escribe each claim.				
	00.2	Course Cauri	• • • • • • • • • • • • • • • • • • • •			\$
35.	Any financ	ial assets you did	i not already list			
	☑ No					
		ive specific informa	ution			
	ies. G	ine specific informa	10011			\$
36.	Add the d	ollar value of all of	f your entries from Par	rt 4, including any entr	ies for pages you have attached	
					→	\$1,150.00
						L
Pa	rt 5: D	escribe Any E	Business-Related	Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
37 .	Do you ow	n or have any lega	al or equitable interest	in any business relat	ed property?	
	No. Go	to Part 6.				
	Yes. G	o to line 38.				
						Current value of the
						portion you own?
						Do not deduct secured claims
						or exemptions.
38.	Accounts	receivable or com	missions you already	eamed		
	□ No		,,			
	☐ Yes. D	it-				
	■ Yes. D	escribe				•
						-
39.	Office equ	ipment, furnishing	gs, and supplies			
	Examples: B	Business-related comp	uters, software, moderns, p	rinters, copiers, fax machin	ies, rugs, telephones, desks, chairs, electronic devices	
	☐ No					
	☐ Yes D	escribe				_
						\$

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Debtor 1	Tawanda First Name	LaShawn	Luckey	Case number (# known)	
	F EOL PARTIE				
40. Machi i	nery, fixtures, ed	quipment, supplies you use i	in business, and tools o	f your trade	
☑ No ☐ Ye	s. Describe				\$
41. Invento					
	s. Describe				\$
42. Interes	-	ps or joint ventures			
	s. Describe	Name of entity:		% of ownership:	
					\$
				%	\$
				%	\$
43. Custon		g lists, or other compilations			
		include personally identifiab	le information (as define	ed in 11 U.S.C. § 101(41A))?	
	□ No	16. .			
	Yes. Descr	ibe			\$
44 Amy bu	cinasa salatad :	property you did not already	lint		
₩ No	211622-1619120	property you did not already	IIDL		
	s. Give specific				\$
	**************************************				\$
					\$
					\$
					\$
					\$
	e dollar value of t 5. Write that <u>n</u>	=	t 5, including any entries	s for pages you have attached	\$
					•
Part 6:		y Farm- and Commercial have an interest in farmland,		perty You Own or Have an Interest I	n.
46. Do you	own or have an	y legal or equitable interest	in any farm- or commer	cial fishing-related property?	
	Go to Part 7. Go to line 47.				
u res	. Go to line 47.				Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
47. Farm a		outry, farm-raised fish			
Examp.	cs. Dresioux, po	uloy, lattiraiscu listi			
					•

Official Form 106A/B

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	LaShawn	Luckey	(Case number (if known)			
her growing or ha	arvested						
						2	
ishing equipment	t, implements, machiner	, fixtures, and too	ls of trade			-	
						\$	
ishing supplies, c	chemicals, and feed						
						\$	
and commercial fi	ishing-related property y	ou did not already	, list				
•						s	
liar value of all of	f your entries from Part 6	s, including any er	itries for pages	vou have attached	Γ	<u> </u>	0.00
					→ [\$	
escribe All Pro	operty You Own or	Have an Inter	est in That	You Did Not List	Above		
	•	already list?					
un annaifia						\$	
•						\$	
					_	\$	
liar value of all of	your entries from Part 7	. Write that numbe	er here			\$	0.00
					I		
st the Totals	of Each Part of this	s Form					
	of Each Part of this				→	\$	0.00
			8,750.00			\$	0.00
ni real estate, line ni vehicles, line 5					→	\$	0.00
ni real estate, line ni vehicles, line 5	2 Dusehold items, line 15		8,750.00		→	\$	0.00
al real estate, line and vehicles, line 5 al personal and ho al financial assets,	2 Dusehold items, line 15		8,750.00 2,050.00		→	\$	0.00
al real estate, line of the second line of the seco	2ousehold items, line 15	\$ \$ \$ \$	8,750.00 2,050.00 1,150.00			\$	0.00
al real estate, line of the second line of the seco	2	\$ \$ \$ \$	8,750.00 2,050.00 1,150.00 0.00		→	\$	0.00
al real estate, line and vehicles, line 5 al personal and ho al financial assets, al business-related al farm- and fishinal other property m	2	\$\$\$\$\$\$\$	8,750.00 2,050.00 1,150.00 0.00 0.00	Copy personal propert	y total → +	\$	0.00
al real estate, line and vehicles, line 5 al personal and ho al financial assets, al business-related al farm- and fishinal other property m	2	\$\$\$\$\$\$\$	8,750.00 2,050.00 1,150.00 0.00 0.00		y total → +	\$	
	her growing or have specific tion	her growing or harvested ve specific tion ishing equipment, implements, machinery ishing supplies, chemicals, and feed and commercial fishing-related property y ve specific tion ollar value of all of your entries from Part 6 Write that number here	first Name Middle Name Last Name ther growing or harvested ve specific fion ishing equipment, implements, machinery, fixtures, and too ishing supplies, chemicals, and feed and commercial fishing-related property you did not already we specific fion oldar value of all of your entries from Part 6, including any en Write that number here escribe All Property You Own or Have an Inter we other property of any kind you did not already list? eason tickets, country club membership we specific tion	ther growing or harvested we specific fion	her growing or harvested we specific fion ishing equipment, implements, machinery, fixtures, and tools of trade ishing supplies, chemicals, and feed and commercial fishing-related property you did not already list we specific fion ishing supplies, chemicals, and feed and commercial fishing-related property you did not already list we specific fion ishing any entries for pages you have attached Write that number here escribe All Property You Own or Have an Interest in That You Did Not List we other property of any kind you did not already list? pages tickets, country club membership we specific	her growing or harvested we specific fion	her growing or harvested we specific fion

Official Form 106A/B

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FIII IN THIS IN	formation to ider	ntify your case;			
Debtor 1	Tawanda	LaShawn	Luckey		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States (Bankruptcy Court for	rthe: Southern District of (Oh io		
Case number					☐ Check if this is a
Case number (If known)					Check if this is a amended filing
(If known)		•			
(If known)	Form 106C	<u>.</u>			

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tex-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	household goods	<u>\$ 2,050.00</u>	_ s	2329.66(a)(4)(b)
	Line from Schedule A/B:	7		100% of fair market value, up to any applicable statutory limit	
	Brief description:	clothes shoes	\$ <u>300.00</u>	<u>_</u> s	2329.55(a)(18)
	Line from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	
	Brief description:	bank of america	\$ <u>300.00</u>	<u> </u>	2329.66(a)(4)(a)
	Line from Schedule A/B:	<u> 17 1</u>		100% of fair market value, up to any applicable statutory limit	
3.	Are vou claimi	ng a homestead exemption o	f more than \$160,375?		

Аге у	ou claiming a homestead exemption of more than \$160,375?
(Subje	ect to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
M N	
□ Ye	es. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	l No
	Yes

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Debtor 1

Tawanda LaShawn Luckey Case number (if known)____

Additional Page

	on of the property and line //B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	rent deposit	s850.00		2329.66(a)(4)(a)
Line from Schedule A/B:	22		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u>_</u> \$	
Line from S <i>chedule A/B:</i>	r 		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:	ere to the contract of the con		☐ 100% of fair market value, up to any applicable statutory limit	
Brief Jescription:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	1000/ office modest value up to	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from S <i>chedule A/B:</i>	***************************************		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	D\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

Fill in this in	formation to identify your	0360.					
			Luckey				
Debtor 1		AShawn Marke	Luckey Last Name				
Debtor 2 (Spouse, if filing)	First Name Mic	idle Name	Last Name				
1	Bankruptcy Court for the: South						
	established control and cools.	Citi Diobila di Cit					
Case number (If known)			_			☐ Check i	
						amende	ed filing
Official	Form 106D						
Sched	ule D: Credito	ors Who	Have Claims Secu	ured	by Prop	erty	12/15
Be as compl	ete and accurate as possit	ole. If two marrie	nd people are filing together, both a	re equal	ly responsible fo	or supplying correct	
information.	If more space is needed, cages, write your name and	opy the Additio	nal Page, fill it out, number the entr	ies, and	attach it to this	form. On the top of	any
udditional po	igoo, while your name and	ouso numbo. (n	Kilewij.				
	editors have claims secure		•				
	eck this box and submit this ii in all of the information bek		with your other schedules. You have r	nothing e	else to report on the	his form.	
WE TES. FI	II III AII OI UIE MIOITEUON DEK	UW.					
Part 1: Lis	it All Secured Claims						
		4.			lumn A	Column B	Column C
			secured claim, list the creditor separa r claim, list the other creditors in Part 2	2 · ~"	ount of claim	Value of collateral that supports this	Unsecured portion
			r according to the creditor's name.	100	not deduct the ue of collateral.	claim	ff any
2.1 First Inv	reetore	Describe th	e property that secures the claim:	2	10,009.60	\$	•
Creditor's Nar	ne			<u> </u>		<u> </u>	·
380 Inte	erstate North Parkway	2010 chry	sler sebring 151837				
Number	Street	As of the da	ite you file, the claim is: Check all that a	apply.			
		Continge	ent				
Atlanta City	Ga 30339 State ZIP Code						
-		☐ Disputed					
	ne debt? Check one.	_	en. Check all that apply.				
Debtor 1 o	•	LLIAn angrea carloan)	ement you made (such as mortgage or secu	ıred			
_	and Debtor 2 only	_ `	lien (such as tax lien, mechanic's lien)				
D	ne of the debtors and another	☐ Judgmer	nt lien from a lawsuit				
☐ Check if	this claim relates to a	Other (in	cluding a right to offset)				
commun							
	is incurred	Last 4 digits	s of account number	_			
2.2		Describe th	e property that secures the claim:	\$		\$:
Creditor's Nan	ne						
Number	Street	_					
		As of the da	ite you file, the claim is: Check all that a er	ipply.			
		Unliquida					
City	State ZIP Code	Oisputed					
Who owes th	ne debt? Check one.	Nature of lie	en. Check all that apply.				
Debtor 1 c	•		ment you made (such as mortgage or secu	red			
Debtor 2 d	•	car loan)	lien (such as tax lien, mechanic's lien)				
	and Debtor 2 only ne of the debtors and another		t lien from a lawsuit				
_			cluding a right to offset)				
Check if commun	this claim relates to a ity debt						
	s incurred	Last 4 digits	of account number				
Add the d	ollar value of your entries i	in Column A on	this page. Write that number here:	\$	<u>10,009.60</u>		

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Debtor 1 Tawanda LaS	hawn Luckey Case nu	TIDEF (if known)		
Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$.	\$
Creditor's Name	-			
M b	_			
Number Street				
	- As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City Stete ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Data dahi was isawand	Last 4 digits of apparet sumber			
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	•	•	•
Creditor's Name	- Describe the property that secures the claim.	V		'
Number Street	-			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only				
Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date deht was incurred	l set A digits of account number			
	Describe the property that secures the claim:	\$	\$:	S
Creditor's Name				
	_			
Number Street				
	- As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	- Unliquidated			
Out In Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
_				
Debtor 1 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 2 only Debtor 1 and Debtor 2 only	Car (oan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
— At reast one or the debiots and another	Other (including a right to offset)			
Check if this claim relates to a community debt		•		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your comin	s in Column A on this page. Write that number here:	. 10,009.60		
	, -	\$ 10,003.00	5	
If this is the last page of your form Write that number here:	, add the dollar value totals from all pages.	10,009.60	1	

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Debt	or 1	Tawanda First Name Middle	LaShawn	Luckey	Case number (if known)
P	art 2:	·	Name Last Name Be Notified for a Deb	t That You Airead	y Listed
ag yo	jency is to ou have m	rying to collect from nore than one credit	you for a debt you owe t	o someone else, list to at you listed in Part 1,	r a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
					_
	City		State	ZIP Code	_
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	02.		2	700	- -
	City		State	ZIP Code	On which line in Part 1 did you enter the creditor?
Ш	Name				Last 4 digits of account number
	Number	Street			_
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	City		A	7/2.2	_
П	City		State	ZIP Code	On which the in Boat & did you and with a second of
	Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Number	Change			- — — — — — — — — — — — — — — — — — — —
	Number	Street			_
	City		State	ZIP Code	_
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	City		State	ZIP Code	- -

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Fi	ll in this in	formation to ide	ntify your case;							
	ebtor 1	Tawanda	LaShawn		Luckey					
	,	First Name	Mickile Name		Last Name					
	ebtor 2 pouse, if filing)	First Name	Middle Name		Last Name					
Ur	vited States (Bankruptcy Court for	the: Southern District	of Ohio						
Ca	se number									ck if this is an
	known)				•				ame	nded filing
<u>O1</u>	ficial F	orm 106E	<u>/F</u> _							
S	chedu	ule E/F: C	Creditors W	/ho	Have Un	secu	red Clain	ns		12/15
List A/B cred nee any	the other: Property litors with ded, copy additiona	party to any exect (Official Form 10 partially secured the Part you need pages, write you	es possible. Use Part cutory contracts or u 16A/B) and on Schedi d claims that are liste d, fill it out, number t ur name and case nu RIORITY Unsecure	nexpire ule G: E d in Sci he entr mber (il	d leases that convecutory Contra- nedule D: Credito les in the boxes of known).	uid result i cts and Ui ors Who H	in a claim. Also li nexpired Lesses (lave Claims Secur	st executory co Official Form 19 ed by Propert y	ontracts on S 06G). Do not v. If more spa	<i>chedule</i> include any ce is
1.	Do any cr	editors have prior	rity unsecured claims	agains	st you?					
	No. Go	to Part 2.								
	Yes.		sound aloins. If a ser	adilos ba	a more than one		and daim list th			alaim Far
	each daim	listed, identify wh	ecured claims. If a creat type of claim it is. If	a daim	has both priority a	nd nonprio	ority amounts, list th	at claim here ar	nd show both (priority and
			h as possible, list the o Continuation Page of l							
	(For an exp	planation of each t	ype of claim, see the ir	nstructio	ns for this form in	the instruc	ction booklet.)			
								Total claim	Priority amount	Nonpriority amount
2.1									_	_
	Priority Cred	itor's Name		Last 4	digits of account	t number _		•	- 2	- 2
	Number	Street		When	was the debt incu	urred? _				
				As of	the date vou file. (the claim is	s: Check all that apply	<i>t</i>		
	City		Otalia and a	_	ntingent					
	•		State ZiP Code	🚨 Uı	aliquidated					
	Debtor	rred the debt? Ch	eck one.	☐ Di	sputed					
	Debtor	•		Type	of PRIORITY uns	secured cl	aim.			
	_	1 and Debtor 2 only			mestic support oblig		u			
	At leas	t one of the debtors	and another		• • • • • •	•	owe the government			
	☐ Check	if this claim is for	r a community debt		aims for death or pe	•	•			
	Is the clai	im subject to offse	±t ?		oxicated	i aas es ingery	wille you were			
	☐ No			☐ o	her. Specify					
	☐ Yes									
2.2				Last 4	digits of account	number _		s	s	s
	Priority Cred	itor's Name			was the debt incu			<u> </u>	<u> </u>	
	Number	Street		As of	the date you file. t	the claim is	s: Check all that apply	,		
				_	intingent		one an anal appry	•		
	City		State ZIP Code		liquidated					
	Who incu	rred the debt? Che	eck one.	Di:	sputed					
	☐ Debtor			Turna	of DDIODITY	secured al	nia.			
	☐ Debtor	2 only			of PRIORITY uns mestic support oblig		dIII].			
	_	1 and Debtor 2 only			• • •		owe the government			
	At least	one of the debtors a	and another		xes and centain othe aims for death or per					
	☐ Check	if this claim is for	a community debt		aims for deam or per exicated	ज्याच्या ॥॥॥॥	wille you were			
	Is the clai	m subject to offse	it?	□ 0t	her. Specify					
	□ №									
	☐ Yes									

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Tawanda LaShawn Luckey Debtor 1 Case number (if known) Your PRIORITY Unsecured Claims — Continuation Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority Nonpriority** amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Street As of the date you file, the claim is: Check all that apply. □ Contingent ■ Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another lacktriangledown Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other_Specify_ Is the claim subject to offset? □ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated 7IP Code ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated ■ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? □ No ☐ Yes

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Tawanda LaShawn Luckey Debtor 1 Case number (# 100) Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Credit One Bank Last 4 digits of account number 5 4 4 0 891.00 Nonpriority Creditor's Name 08/04/2017 When was the debt incurred? PO Box 98872 Street NV 89193 Las Vegas As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one ■ Unliquidated ■ Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>credit card</u> Ø No ☐ Yes 1,110.00 Last 4 digits of account number _2 4 0 First Preimer Bank When was the debt incurred? 07/20/2016 Nonpriority Creditor's Name 3820 N. Louise As of the date you file, the claim is: Check all that apply. 57107 SD Sioux Falls ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ☐ No ☐ Yes Last 4 digits of account number _2 _1 _1 _6 **Navient** 38,297.00 Nonpriority Creditor's Name When was the debt incurred? 10/21/2005 123 Justison Street 3rd Floor Number Wilmington 19801 DE As of the date you file, the claim is: Check all that apply. ZIP Code ☐ Contingent Who incurred the debt? Check one. ■ Unliquidated Debtor 1 only ■ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **☑** No Other. Specify_ ☐ Yes

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Debto	or 1 I awanua Lasnawn First Name Middle Name	Lucke Last Nam		Case number (if known)	
Par	2: Your NONPRIORITY Unsec			uation Page	
Afte	r listing any entries on this page, nur	nber the	m beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
\neg					
	First Investors attn:bankruptcy	dept.		Last 4 digits of account number 3 5 1 1	\$ 10,009. 6
	Nonpriority Creditor's Name	<u> </u>		When was the debt incurred? 03/24/2012	
	380 Interstate North Pkwy #300	J			
	Atlanta	Ga	30339	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.			Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans	
	_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify auto I oan	
	☑ No				
	Yes				
\neg					
	Direct Tv			Last 4 digits of account number 30079	s 620.19
	Nonpriority Creditor's Name				
	2230 E. Imperial			When was the debt incurred? U0/U1/2U17	
	Number Street E/ Segundo	CA	90245	As of the date you file, the claim is: Check all that apply.	
		State	ZIP Code	Contingent	
				☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a communi	ity debt		you did not report as priority claims	
	Is the claim subject to offset?	-		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify_telecommunication	
	☑ No			Cina. Specify Ciccommunication	
	Yes				
\neg					004.00
	Time Momes Cable			Last 4 digits of account number 0 8 0 1	\$ <u>881.00</u>
	Time Warner Cable Nonpriority Creditor's Name			-	
	60 Columbus Circle			When was the debt incurred? 04/03/2016	
	Number Street New York	Nh.	10023	As of the date you file, the claim is: Check all that apply.	
		Ny State	ZIP Code	Contingent	
	•			Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			☐ Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a communi	ity debt		you did not report as priority claims	
	Is the claim subject to offset?	.,		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify_telecommunication	
	No			w Ones. Specify telecontinuolication	
	₩ No Yes				

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Debt		LaShawn	Luckey	Case number (#Ima-m)	
	First Name Vidde	Name Last Na	me		
Par	Your NONPRIORI	TY Unsecured C	claims — Continua	tioo Page	
Afte	er listing any entries on this	s page, number the	em beginning with 4.	4, followed by 4.5, and so forth.	Total claim
	Choice Recovery Inc			Last 4 digits of account number $200 75$	\$ 80.00
	Nonpriority Creditor's Name			When was the debt incurred? 05/09/2018	
	po box 20790			Men as the rest service:	
	Number Street Columbus	Oh	43220	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	•			☐ Unliquidated	
	Who incurred the debt? Che	eck one.		Disputed	
	Debitor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors a			Student loans	
	_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for	a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offse	1?		Other. Specify medical quaified	
	Mo No				
	☐ Yes				
	Senex Service			Last 4 digits of account number 6 9 5 1	s 119.00
	Nonpriority Creditor's Name			When was the debt incurred? 08/21/2015	
	3333 founders rd 2nd	ត		THE TWO DIE GERT HERBITED!	
	Number Street Indianapolis	in	46268	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	-			☐ Unfiquidated	
	Who incurred the debt? Che	ck one.		☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors a	and another		Student loans	
	_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	U Check if this claim is for	a constructly debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset	t?		Other. Specify Tri health	
	☑ No				
	Yes				
					e 900.00
Ш	TWC			Last 4 digits of account number 3 4 8 4	\$
	Norpriority Creditor's Name			00/400047	
	60 Columbus Circle			When was the debt incurred? 06/13/2017	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	New York	Ny	10023	-	
	Céy	State	ZIP Code	Confingers	
	Who incurred the debt? Che	ck one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debions a	nd කාණස		Obligations arising out of a seguration agreement or divorce that	
	☐ Check if this claim is for	a community debt		you did not report as priority claims	
		•		Debts to pension or profit sharing plans, and other similar debts	
	is the claim subject to offset No	LŦ		Other. Specify <u>Cable</u>	
	¥ No ☐ Yes				
	- 103				

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Page 31 of 61 Document Tawanda LaShawn Luckey Debtor 1 Case number (if ian Your NONPRIORITY Unsecured Claims — Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total claim** Last 4 digits of account number 1 0 3 3 Wright-Patt Credit Union 27.00 Nonpriority Creditor's Name 04/27/2018 When was the debt incurred? 2455 Executive Park Blvd Number As of the date you file, the claim is: Check all that apply. Fairborn OH 45324 **7IP Code** ☐ Contingent ■ Unliquidated Who incurred the debt? Check one. ■ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other Specify deposit ovdrft ☑ No ☐ Yes Last 4 digits of account number $\frac{7}{6}$ $\frac{6}{1}$ 0 572.00 AD Astra Recovery Service Nononiurity Creditor's Name 02/15/2018 When was the debt incurred? 7330 W. 33rd ST NSTE 118 Number As of the date you file, the claim is: Check all that apply. Wichite 67205 KS ZIP Code State ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed ✓ Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Speedy cash Mo No ☐ Yes 278.00 Last 4 digits of account number 1 3 6 5 Caine&Weiner Nonpriority Creditor's Name When was the debt incurred? 06/13/2018 5805 Sepulveda blvd 4th fl Stree As of the date you file, the claim is: Check all that apply. Sherman Oaks CA 91411 ☐ Contingent ZIP Code

☑ Debtor 1 only Debtor 2 only

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Unliquidated

Type of NONPRIORITY unsecured claim:

you did not report as priority claims

Other. Specify <u>progressive</u>

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

■ Disputed

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Debtor 1

Tawanda

LaShawn

Luckey

- 01 01

	First Name	Middle Name	Last Name		
				04 4 5	
art 2:	Your NONP	RIORITY Uns	secured Claims	Continuation Page	

Aftı	er listing any entries on this page, number	or them beginning with	4.4, followed by 4.5, and so forth.	Total claim
	Duke Energy		Last 4 digits of account number 2 8 1 2	ş 565.12
	Nonpriority Creditor's Name po box 690mail drop309c		When was the debt incurred? 05/09/2018	
	Number Street Cincinnati O	h 45201	As of the date you file, the claim is: Check all that apply.	
	City State		Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community	debt	you did not report as priority claims	
	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other_Specify_utilites	
	☑ No		Cona specify durines	
	Yes			
	Sprint attn: bankruptcy departmen	ıt.	Last 4 digits of account number 5 3 3 7	s 1,189.03
	Nonpriority Creditor's Name			
	6200 Sprint Parkway Number Street		When was the debt incurred? 08/21/2015	
	Overland Park KS	66251	As of the date you file, the claim is: Check all that apply.	
	City State	e ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community of	debt	you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify_ Cell phone bill	
	M No		Colid. Specify Coll priorite bill	
	☐ Yes			
			Last 4 digits of account number 2 9 6 5	ş_799.90
	Verizon Wireless Nonpriority Creditor's Name		Last 4 digits of account number 2 9 0 5	
	140 W. St		When was the debt incurred? $06/13/2017$	
	Number Street		As of the date you file the plains in Charlett that and	
	New York Ny		As of the date you file, the claim is: Check all that apply.	
	City State	e ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only			
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debitors and another		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community of	debt	you did not report as priority claims Debts to pension or profit sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify_cell phone bill	
	☑ No ☐ Yes			

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Debtor 1 Tawanda LaShawn Luckey Case number (# known)_______

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this page, num	mber the	m beginning with 4	I.A, followed by 4.5, and so forth.	Total clai
5/3rd Bank : attention bankrupt	try den	•	Last 4 digits of account number 3 4 8 4	s 1,000
Nonpriority Creditor's Name	icy dep	<u> </u>	05/00/0047	\$ <u>1,000</u>
38 Fountain Square			When was the debt incurred? 05/09/2017	
Cincinnati	Oh	45202	As of the date you file, the claim is: Check all that apply.	
	State	ZIP Code	☐ Contingent	
			☐ Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and anotherCheck if this claim is for a commun	it,, da Li		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	iity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other Specify collection	
☑ No □ Yes				
Key Bank attention: bankruptcy	/ dept_		Last 4 digits of account number $5 \ 3 \ 3 \ 7$	\$ <u>550</u>
Nonpriority Creditor's Name 53 e. 4th st			When was the debt incurred? $08/21/2015$	
Number Street	Ob	45202	As of the date you file, the claim is: Check all that apply.	
Cincinnati City	Oh State	ZIP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
Debtor 1 only			ш изритеа	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and another			Student loans	
Check if this claim is for a communi	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?			Other. Specify Collection	
✓ No			Guidi, Specify Solitossoft	
■ Yes				
Huntington National Bank atten	ntion Ba	inkruptcy dept_	Last 4 digits of account number 2 9 6 5	\$ <u>999</u>
41 South High St.			When was the debt incurred? 06/13/2017	
Columbus	Oh	43287	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
			☐ Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a communi	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No			Other. Specify collection	

Case 1:19-bk-11222 Doc 1 Filed 04/05/19 Entered 04/05/19 15:19:29 Desc Main Document Page 34 of 61 Tawanda LaShawn Luckey Debtor 1 Case number (if to Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim **Progressive Leasing** Last 4 digits of account number 2 3 6 8 1.150.00 Nonpriority Creditor's Name 01/22/2017 When was the debt incurred? 256 West Data Drive Number Draper 84020 UT As of the date you file, the claim is: Check all that apply. City ZIP Code □ Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only ☐ Disouted Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **☑** No Other Specify loan ☐ Yes 1,500.00 Last 4 digits of account number 2 merrick Bank attention bank ruptcy dept 04/23/2016 Nanotiority Creditor's Name When was the debt incurred? po box 1442 Number As of the date you file, the claim is: Check all that apply. UT 84020 Draper ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one. ■ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☐ Other Specify_ ☐ No ☐ Yes 4.3 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Numbe As of the date you file, the claim is: Check all that apply. City ZIP Code State Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only □ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ No

☐ Yes

Is the claim subject to offset?

Other. Specify _

Debts to pension or profit-sharing plans, and other similar debts

Cas	SE 1.19-UK-11222		ocument	Page 35 of 61	/iaiii
	Towards			1 ago 00 01 01	
Debtor 1	Tawanda First Name Middle Name	LaShawn Last Name	Luckey	Case number (# known)	
Part 2:	Your NONPRIORITY	Unsecured Clai	ms — Continua	tion Page	
After listi	ng any entries on this pa	ge, number them	beginning with 4	.4, followed by 4.5, and so forth.	Total claim
	Ke Energy iority Creditor's Name			Last 4 digits of account number 9 3 7 3	s 221.00
Pol	box 960 mail drop 309	9c		When was the debt incurred? 02/02/2016	
	er Street cinnati	Oh	45201	As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	Contingent	
Who	incurred the debt? Check of	one.		☐ Unliquidated ☐ Disputed	
•	ebtor 1 only			·	
	ebtor 2 only ebtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
_	ebtor 1 and Debtor 2 only t least one of the debtors and a	another		Student loans	
_	heck if this claim is for a c			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	claim subject to offset?	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Ø N				Other Specify utili ties	
□ Y					
				Last 4 digits of account number	
Nonori	ority Creditor's Name			Cast 4 digits of account fluilloar	•
				When was the debt incurred?	
Numbe	er Street			As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	Contingent	
Who	incurred the debt? Check o	ne		Unliquidated	
_	ebtor 1 only	· · · · · · · · · · · · · · · · · · ·		☐ Disputed	
	ebtor 2 only			Type of NONPRIORITY unsecured claim:	
	ebtor 1 and Debtor 2 only			☐ Student loans	
LI AI	least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
	heck if th is claim is for a co	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	claim subject to offset?			Other Specify	
□ Ne					
\neg					
				Last 4 digits of account number	\$
Nonpri	Ority Creditor's Name			When was the debt incurred?	
Numbe	er Street			As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	☐ Contingent	
Who	incurred the debt? Check o	ne.		☐ Unliquidated	
_	ebtor 1 only			☐ Disputed	
	ebtor 2 only			Type of NONPRIORITY unsecured claim:	

Debtor 1 and Debtor 2 only At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community debt

Other. Specify___

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill \Box$ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 T

<u>Tawanda</u>

LaShawn

Luckey

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Case number (if known)___

Part 3:

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				_
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Sueci			☐ Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Va me				
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Nullibea	Sueer			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Otan), analy Deput & Conditions with Driving Unaccount Chairs
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
				Leat 4 digits of account number
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Ohart and D. Dadd Ondiana its District Hannan delicina
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Case.			Claims
				Last 4 digits of account number
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City		State	ZIP Code	
lama				On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of the control Double of the control of the co
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number

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Debtor 1 Tawanda LaShawn Luckey Case number (# known)______

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a .	s0.00
from Part 1	6b. Taxes and certain other debts yo government	u owe the 6b.	s0.00
	6c. Claims for death or personal inju intoxicated	ry while you were 6c.	s0.00
	6d. Other. Add all other priority unseq. Write that amount here.	red claims. 6d.	+\$ 0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	ş 38,297.00
from Part 2	6g. Obligations arising out of a sepa or divorce that you did not repor claims		\$0.00
	6h. Debts to pension or profit-sharin similar debts	g plans, and other 6h.	\$0.00
	6i. Other. Add all other nonpriority uns Write that amount here.	ecured daims. 6i.	+ \$58,888.73
	Sj. Total. Add lines 6f through 6i.	6 j.	ş97,185.73

	nformation to ide	entity your	case:							
Debtor	Tawanda	La	Shawn	Luckey]				
Debtor 2	First Name	Mi	iddle Name	Læst Name		ĺ				
Spouse If filing)	First Name	Mi	iddle Name	Last Name						
United States	Bankruptcy Court fo	r the: South	em District of	Ohio						
Case number (If known)									Check if the amended	
Official F	Form 1060	3								
chedi	ule G: Ex	 cecut	ory Co	ntracts an	d Un	expired	l Lease	es	1	2/15
No. C Yes. I List sepa	Fill in all of the inf rately each pers , rent, vehicle lea	d file this for cometion or com	m with the con slow even if the pany with wh	urt with your other sch e contracts or leases norn you have the co	are listed o	on Schedule Allease. Then sta	B: <i>Property</i> (O	fficial Form	106A/B). r lease is for (fo	
unexpired	i leases.		·							
·	r company with	whom you	have the cor		om in the	State what th	ne contract or	r lease is fo	or	
Person o		whom you	have the cor						or	
Person o	r company with		have the cor			State what th			o r	
Person o First In Name 380 Int	r company with terstate erstate North Street	Parkway				State what th			or	
Person o First In Name 380 Int Number Atlanta	r company with terstate erstate North Street	Parkway Ga	30339			State what th			or	
Person o First In Name 380 Int Number Atlanta City	r company with terstate erstate North Street	Parkway				State what th			of	
Person o First In Name 380 Int Number Atlanta	r company with terstate erstate North Street	Parkway Ga	30339			State what th			or	
Person o First In Name 380 Int Number Atlanta City	r company with terstate erstate North Street	Parkway Ga	30339			State what th			or	
Person o First In Name 380 Int Number Atlanta City	r company with terstate erstate North Street	Parkway Ga	30339			State what th			of	
Person o First In Name 380 Int Number Atlanta City Name	terstate erstate North Street	Parkway Ga	30339			State what th			ur	
Person o First In Name 380 Int Number Atlanta City Name	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			of	
Person o First In Name 380 Int Number Atlanta City Name Number City	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			ur	
Person o First In Name 380 Int Number Atlanta City Name Number City City City	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			or .	
Person o First In Name 380 Int Number Atlanta City Name Number City Name Number	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			ir	
Person o First In Name 380 Int Number Atlanta City Name Number City Name Number City	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			or .	
Person o First In Name 380 Int Number Atlanta City Name Number City Name Number	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			or .	
Person o First In Name 380 Int Number Atlanta City Name Number City Number City City City City City	terstate erstate North Street	Parkway Ga State	30339 ZIP Code			State what th			or and a second	
Person o First In Name 380 Int Number Atlanta City Name Number City Name Number City Name	erstate erstate North Street Street	Parkway Ga State	30339 ZIP Code			State what th				

Number

City

Street

State

ZIP Code

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Oebt	or 1	Tawanda	LaSh		Luckey	Case number (if known)
		First Name Mid	ddle Name	Læst Narne		
		Additional Pa	ge if You Ha	ive More C	ontracts or Lea	ases
	Person	or company wit	th whom you	have the co	ntract or lease	What the contract or lease is for
2 <u>2</u>						
	Name					
	Number	Street				
	City		State	ZIP Code		
2	Name					
	Number	Street				
	City		State	ZIP Code		
2	Oily		Ciac	Zii Gode		
	Name					
	Number	Street				
	City		State	ZIP Code		
2						
	Name					
	Number	Street				
	City		State	ZIP Code		
2						
	Name					
	Number	Street				
	City		State	ZIP Code		
2	Name					
	Number	Street				
	City		State	ZIP Code		
2						
	Name					
	Number	Street				
	City		State	ZIP Code		
2						
	Name					
	Number	Street				

City

State

ZIP Code

Fill in	this information to ide	entify your case;		
Debto	_{r 1} Tawanda	LaShawn	Luckey	
Debtor	First Name	Midde Name	Læst Name	
	e, if filing) First Name	Middle Name	Last Name	
United	States Bankruptcy Court fo	r the: Southern District of O	nio	
Case r	number			
(Check if this is an amended filing
Offic	cial Form 106			
		<u>-</u> - our Codebtor	S	12/15
are filin and nu case no	ng together, both are ember the entries in the umber (if known). Ans	qually responsible for sup boxes on the left. Attach wer every question.	plying correct inform the Additional Page t	have. Be as complete and accurate as possible. If two married peop lation. If more space is needed, copy the Additional Page, fill it out, to this page. On the top of any Additional Pages, write your name ar
_	No	ors? (If you are filing a joint	case, do not list enther	spouse as a codebtor.)
	Yes			
		•	• • • •	territory? (Community property states and territories include
		Louisiana, Nevada, New M	exico, Puerto Rico, Te	kas, Washington, and Wisconsin.)
_	No. Go to line 3.	former spouse, or legal equ	ivalent live with you at	the time?
	No	tornier spouse, or regarequ	ivaicii live willi you at	uie uiie:
	_	munity state or territory did y	rou live?	. Fill in the name and current address of that person.
				<u>. </u>
	Name of your spouse, fr	ormer spouse, or legal equivalent		
	Number Street			
	<u></u>	Danie.	ZIPC	
	City	State		
	•		•	codebtor if your spouse is filing with you. List the person cosigner. Make sure you have listed the creditor on
	_	•	_	r Schedule G (Official Form 106G). Use Schedule D,
Sc	hedule E/F, or Schedu	le G to fill out Column 2.		
С	column 1: Your codebto	r		Column 2: The creditor to whom you owe the debt
24				Check all schedules that apply:
3.1	Name			Schedule D, line
_				Schedule E/F, line
1	Number Street			☐ Schedule G, tine
•	City	State	ZIP	Code
3.2				Schedule D, line
Ī	Name			Schedule E/F, line
ī	Number Street			Schedule G, line
7	City	State	7(0	Code
3.3	Jusy	3 11 10	ZIP	· · · · · · · · · · · · · · · · · · ·
	Varne			Schedule D, line
-	 			Schedule E/F, line
,	Number Street			Schedule G, line
ī	City	State	ZIP	Code

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Debt	or 1	Tawanda First Name	LaShawn Middle Name Last Name	Luckey		Case number (# known)
		r ast realise	made realite			
		Additional l	Page to List More Codebt	ors		
	Column	1: Your code	btor			Column 2: The creditor to whom you owe the debt
3						Check all schedules that apply:
	Name					Schedule D, line
						☐ Schedule E/F, line
	Number	Street				Schedule G, line
	City		State		ZIP Code	
3						Schedule D, line
	Name					
						Schedule E/F, line
	Number	Street				Schedule G, line
	City		State		ZIP Code	
3	Name					Schedule D, line
	Name					☐ Schedule E/F, line
	Number	Street				Schedule G, line
	City		State		ZIP Code	
3	Name					Schedule D, line
						☐ Schedule E/F, line
	Number	Street		··· · · · · · · · · · · · · · · · · ·		Schedule G, line
	City		State		ZIP Code	<u> </u>
3	Ony		OBE.		21 0000	
	Name					Schedule D, line
						☐ Schedule E/F, line
	Number	Street				Schedule G, line
	City		State		ZiP Code	
3						Schedule D, line
	Name					Schedule E/F, line
	Number	Street				Schedule G, line
	City		State		ZIP Code	
3	Name					Schedule D, line
						☐ Schedule E/F, line
	Number	Street		**************************************		Schedule G, line
	City		State		ZIP Code	<u></u>
3	-					D
	Name					Schedule D, line
						Schedule E/F, line
	Number	Street				Schedule G, line
	City		State		ZIP Code	

Fill in	this information to identify	your case:					
Debto	1 Tawanda	LaShawn	Luckey				
	First Name	Middle Name	Last Name	Check if the			
Debtor (Spous	e, if filing) First Name	Middle Name	Last Name	An am		•	petition chapter 13
United	States Bankruptcy Court for the:	Southern District of O	hio			snowing posq f the following	•
Case i	number Mn)			MM / D	D/ YYYY		
Offic	cial Form 106J	_					
Scl	hedule J: Yo	ur Expen	ses				12/15
inform	•	led, attach another si		ng together, both are equally (. On the top of any additional	•	• • •	_
Part 1	Describe Your Ho	usehold					
1. Is th i	is a joint case?						
	lo. Go to line 2. 'es. Does Debtor 2 live in a	separate household?	•				
	☐ No ☑ Yes. Debtor 2 must fi	le Official Form 106J-2	2, Expenses for S	eparate Household of Debtor 2.			
2. Do y	ou have dependents?	□ No		Department's relationship to		Dependent's	Does dependent live
Do n Debt	ot list Debtor 1 and or 2.	Yes. Fill out this each dependen	information for t	Debtor 1 or Debtor 2		age	with you?
Do n	ot state the dependents'			daughter		17	□ No ☑ Yes
							□ No
							☐ Yes
							□ No □ Yes
							□ No
							Yes
							□ No
_							☐ Yes
expe	our expenses include enses of people other than self and your dependents?	☑ No □ Yes					
	•						
Part 2:				re using this form as a supple	ment in	a Chanter 13 c	ase to mood
expens	• •		•	ental Schedule J, check the bo		•	•
	expenses paid for with no	•	•			Va av.a.	
			•	•		Your expe	rises
	rental or home ownership rent for the ground or lot.	expenses for your re	sidence. Include	nist mortgage payments and	4.	\$	850.00
	ot included in line 4:					•	0.00
4a.	Real estate taxes	rontor'e ineumano			4a.	\$ \$	
4b_ 4c.	Property, homeowner's, or or Home maintenance, repair,				4b. 4c.	≯ \$	
40. 4d.	Homeowner's association o	, , ,	•		4C. 4d.	\$S	0.00

Debtor 1 Tawanda LaShawn Luckey Case number (#Innorm)

			Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	175.32
	6b. Water, sewer, garbage collection	6b .	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	60.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	05.00
10.	Personal care products and services	10.	\$	100.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	126.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include texes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	398.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	s	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Official Form 106J Schedule J: Your Expenses page 2

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Debtor			LaShawn	Luckey	Case number (if trans	·)(
21. O t	First Name ther. Specify:	Mixtle Name	Last Name		-	21.	+\$	0 <u>.0</u> <u>0</u>
22. Ca	iculate your mont	thly expenses	·					
22	a. Add lines 4 throu	ıgh 21.				22a.	\$	2,194.32
22	b. Copy line 22 (mo	onthly expense	s for Debtor 2), if a	ny, from Official Form	106J-2	2 2 b.	\$	0.0 0
22	c. Add line 22a and	22b. The resu	ult is your monthly o	expenses.		22c.	\$	2,194.32
23. Cal	culate your month	nly net income).				_	2,194.32
23a.	Copy line 12 (yo	our combined n	nonthly income) fro	om <i>Schedule I.</i>		23a .	\$	2,194.32
23b.	Copy your mont	hly expenses f	rom line 22c above	e .		23b.	-\$	2,194.32
23c.	Subtract your m The result is you		es from your montr income.	nly income.		23c.	\$	<u> </u>
24. Do	you expect an inc	rease or decr	ease in your expe	enses within the year	after you file this form?			
	• • •	•		r loan within the year or a modification to the te	r do you expect your rms of your mortgage?			
	No.							
	Yes. Explain he	ere:						

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Fill in this in					
FIII III UIIS III	formation to iden	tify your case:			
Debtor 1	Tawanda First Name	LaShawn Middle Name	Luckey Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	— [
United States I	Bankruptcy Court for t	the: Southern District of O	Phio		
Case number					
(If known)					Check if this is amended filing
-	Form 106	-			
Decl	aration	About an I	ndividua	l Debtor's Sch	edules 12/15
	ile this form wher	never you file bankruptc	y schedules or ame	•	statement, concealing property, or
obtaining r	ile this form when noney or property	never you file bankruptc	sy schedules or ame with a bankruptcy o	nded schedules. Making a false	
obtaining in years, or but the pears, or but the pears, or but the pears of the pea	ile this form when noney or property oth. 18 U.S.C. §§ Sign Below	never you file bankrupto y by fraud in connection 152, 1341, 1519, and 357 pay someone who is NO	ey schedules or ame o with a bankruptcy of 11.	nded schedules. Making a false case can result in fines up to \$25	statement, concealing property, or 60,000, or imprisonment for up to 20
obtaining in years, or be	ile this form when noney or property oth. 18 U.S.C. §§	never you file bankrupto y by fraud in connection 152, 1341, 1519, and 357 pay someone who is NO	ey schedules or ame o with a bankruptcy of 11.	nded schedules. Making a false case can result in fines up to \$25	statement, concealing property, or

Date MM / DD / YYYY

Fill in this in	oformation to identify	your case:				
Debtor 1	Janna	LaShawn L	.uckey			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	District of				
Case number (# known)				l	Check if th	
						ended filing lement showing postpetition chapter 13
						e as of the following date:
Official Fo	orm 1061	-			MM / DI	D/ YYYY
Sched	lule I: You	ır Income				12/15
supplying cor If you are sep separate shee	rect information. If yourspool	ou are married and not filingse is not filing with you, do top of any additional page	ng jointly, and you lo not include info	ur spouse is ormation abo	living with your spou	r 2), both are equally responsible for ou, include information about your spouse. use. If more space is needed, attach a nown). Answer every question.
1. Fill in your	r employment on.		Debtor 1			Debtor 2 or non-filing spouse
	more than one job,					
	parate page with n about additional	Employment status	Employed Not employe	ed		☐ Employed ☐ Not employed
Include par self-emplo	rt-time, seasonal, or wed work					
Occupation	n may include student aker, if it applies.	Occupation	Customer Se	rvice		
		Employer's name	Humana			
		Employer's address	321 West ma	in Street		
		• • • •	Number Street			Number Street
				16.		
			Louisville City	Ky State ZIP (40202 Code	City State ZIP Code
		How long employed there	9?			
Part 2:	Give Details About	Monthly Income				
spouse un	ess you are separated.	- -	-		-	te \$0 in the space. Include your non-filing
		ive more than one employer, tach a separate sheet to this		mation for all	employers for	r that person on the lines
				For	Debtor 1	For Debtor 2 or non-filing spouse
		ary, and commissions (befo calculate what the monthly v		2. \$_2	645.30	\$
3. Estimate	and list monthly over	time pay.		3. + \$		+ \$
4. Calculate	gross income. Add lir	ne 2 + line 3.		4. \$_2	645.30	\$

Official Form 1061 Schedule I: Your Income page 1

Debtor 1	Janna Fret Name	LaShawn Middle Name Last Name	Luckey		Ca	se number (# km	own)			
	1 30 (10)									
					For	Debtor 1	For Debtor 2 or non-filing spou			
Cop	y line 4 here			4 .	\$	2,645.30	\$			
5. List	ali payroli ded	uctions:								
5a	Tax. Medicare	, and Social Security deductions		5a.	•	337.88	\$			
		miributions for retirement plans		5b.	\$	39.60	\$			
	_	tributions for retirement plans		5c.	\$	0.00	\$	-		
	•	syments of retirement fund loans		5d.	\$	0.00	\$			
5e	. Insurance	•		5e.	\$	133.90	\$			
5f.	Domestic sup	port obligations		5f.	\$	0.00	\$			
50	. Union dues	. •		5g.	\$	0.00	\$			
•		ons. Specify:		5h.	+s	0.00	+ \$			
		eductions. Add lines 5a + 5b + 5c +			\$	550.98	\$			
7. Ca	iculate total mo	onthly take-home pay. Subtract line	e 6 from line 4.	7.	\$	2,094.32	\$			
8. Lis	t all other incor	ne regularly received:								
8a	Net income fro profession, or	om rental property and from oper	ating a business,							
		nent for each property and business ary and necessary business expens- come.		8a.	\$	0.00	\$			
8b	. Interest and d	ividends		8b.	\$	0.00	\$			
8c.	. Family suppo regularly rece	rt payments that you, a non-filing ive	spouse, or a depende	ent						
		y, spousal support, child support, ma I property settlement.	aintenance, divorce	8c.	\$	100.00	\$			
8d	. Unemployme	nt compensation		8d.	\$	0.00	\$			
8e	. Social Securit	у		8e .	\$	0.00	\$			
8f.	Include cash as that you receive Nutrition Assist	ment assistance that you regulari ssistance and the value (if known) o e, such as food stamps (benefits un ance Program) or housing subsidie	of any non-cash assistant der the Supplemental s.	oce 8f.	\$	0.00	\$			
00	. ,	irement Income		0~	•	0.00	•			
•				8g.	•—		.			
8n.	. Other monthly	income. Specify:		8h.	+\$	0.00	+\$			
9. Ad	d all other inco	me. Add lines 8a + 8b + 8c + 8d + 8	Se + 8f +8g + 8h.	9.	\$	0.00	\$			
	•	income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or n	non-filing spouse.	10.	\$	2,194.32	+ \$	=	\$	2,194.32
Incl	_	ular contributions to the expenses s from an unmarried partner, memb	-			nts, your roor	mmates, and other			
Do	not include any a	amounts already included in lines 2-	10 or amounts that are	not av	ailable	to pay expen	ses listed in S <i>chedu</i>			
Spe	cify:						_	11. +	\$	0.00
		the last column of line 10 to the and the Summary of Your Assets and					•	12.	Comb	2,194.32 Dined hty income
_	you expect an	increase or decrease within the y	rear after you file this f	iorm?					***************************************	ay moone
	Yes. Explain:			***						

Official Form 1061 Schedule I: Your Income page 2

Debtor 1	Tawanda	LaShawn	Luckey	1			
	First Name		Mickele Name	Last Name			
ebtor 2 ouse, if filing) First Name		Middle Name	Last Name			
ted States	Bankruptcy Cou	øt for the: Sou	uthem District	of Ohio			
se number						□ o t - 1 #	
mown)						☐ Check if amende	
ficial I	Form 10	7					
atem	ent of	Financ	ial Affa	irs for Indiv	iduals Filing for	Bankruptcy	04/
as comple	ete and accur	ate as possi	ble. If two ma	rried people are filin	g together, both are equally re	sporsable for supplying correct	
	•	-	•	rate sheet to this fo	m. On the top of any additiona	l pages, write your name and ca	150
nder (IT KI	iown). Answe	r every ques	tion.				
art 1: C	Sive Details	About You	ır Marital Si	atus and Where Y	ou Lived Reform		
What is y	our current	narital statu:	5 ?				
☐ Marri	ad						
Mam V Not n							
☑ No	-	•	-	re other than where y			
☑ No ☐ Yes.	-	•	-	re other than where y 3 years. Do not includ Dates Debtor 1 lived there	e where you live now.	Dates lived th	Debtor 2 nere
☑ No ☐ Yes.	List all of the	•	-	3 years. Do not includ Dates Debtor 1	e where you live now.	lived ti	ere
☑ No ☐ Yes.	List all of the	•	-	3 years. Do not includ Dates Debtor 1 lived there	e where you live now. Debtor 2:	lived the	nere e as Debtor
✓ No ☐ Yes.	List all of the	olaces you live	-	B years. Do not includ Dates Debtor 1 lived there From	e where you live now. Debtor 2:	lived the Same	nere e as Debtor
✓ No ☐ Yes.	List all of the potor 1:	olaces you live	-	3 years. Do not includ Dates Debtor 1 lived there	e where you live now. Debtor 2: Same as Debtor 1	lived the	nere e as Debtor
✓ No ☐ Yes.	List all of the potor 1:	olaces you live	-	B years. Do not includ Dates Debtor 1 lived there From	e where you live now. Debtor 2: Same as Debtor 1	lived the Same	nere e as Debtor
✓ No ☐ Yes.	List all of the potor 1:	places you live	-	B years. Do not includ Dates Debtor 1 lived there From	e where you live now. Debtor 2: Same as Debtor 1 Number Street	lived the Same	nere e as Debtor
No Det	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From	e where you live now. Debtor 2: Same as Debtor 1 Number Street	lived the Same From To State ZIP Code	nere e as Debtor
No Det	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City	Same From To State ZIP Code	e as Debtor
No Det	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City	Same From To State ZIP Code Same From From From From From	e as Debtor
No Det	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	Same From To State ZIP Code	e as Debtor
No Det	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	Same From To State ZIP Code Same From From From From From	e as Debtor
Nu Yes.	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Number Street	Same From To State ZIP Code From To	e as Debtor
No Del	List all of the potor 1:	places you live	ed in the last :	B years. Do not includ Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Number Street	Same From To State ZIP Code Same From From From From From	e as Debtor
Nu Yes. Det Nu City Within th	List all of the potor 1: mber Stree	States, did you ev	ed in the last : te ZIP Code te ZIP Code	B years. Do not includ Dates Debtor 1 lived there From To From To Spouse or legal equi	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Number Street City City City City	State ZIP Code State ZIP Code From To State ZIP Code From To State ZIP Code	e as Debtor as Debtor
Nu Yes. Det Nu City Within the states and	List all of the potor 1: mber Stree	States, did you ev	ed in the last : te ZIP Code te ZIP Code	B years. Do not includ Dates Debtor 1 lived there From To From To Spouse or legal equi	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Number Street City City City City	Same From To State ZIP Code State ZIP Code	as Debtor as Debtor
Number of the states and the states are states are states and the states are states are states and the states are states	btor 1: mber Stree mber Stree mber Stree d territories in	States, did you evo	te ZIP Code te ZIP Code er live with a	B years. Do not includ Dates Debtor 1 lived there From To From From Spouse or legal equilaho, Louisiana, Neva	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1 Number Street City Ci	State ZIP Code State ZIP Code From To State ZIP Code From To State ZIP Code	e as Debtor as Debtor
Number of Number	btor 1: mber Stree mber Stree mber Stree d territories in	States, did you evo	te ZIP Code te ZIP Code er live with a	B years. Do not includ Dates Debtor 1 lived there From To From To Spouse or legal equi	e where you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1 Number Street City Ci	State ZIP Code State ZIP Code From To State ZIP Code From To State ZIP Code	e as Debtoo

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ebtor 1	Tawanda LaShawn Lucke First Name Middle Mane Last N	,	Case nur	mber (it treasm)	
Fill If yo	you have any income from employment in the total amount of income you received ou are filing a joint case and you have income the income you have you	from all jobs and all busi	nesses, including part-tin	ne activities.	endar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$ 7,41 3. 25	Wages, commissions, bonuses, tips	\$
	and date you mod for bankingtoy.	Operating a business		Operating a business	
	For last calendar year:	Wages, commissions, bonuses, tips	\$ 17,553.00	Wages, commissions, bonuses, tips	\$
	(January 1 to December 31.2018 YYYY	Operating a business		Operating a business	
	For the calendar year before that:	Wages, commissions, bonuses, tips	20.050.00	Wages, commissions, bonuses, tips	
	(January 1 to December 31, <u>2017</u>)	Operating a business	\$30,958.00	Operating a business	\$
4	each source and the gross income from ea No Yes. Fill in the details.	ach source separ ately . Do	o not include income that	you listed in line 4.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until		\$		- \$
	the date you filed for bankruptcy:		\$		- \$
	-		\$		- \$
	For last calendar year:		\$ 0.00		- \$
	(January 1 to December 31,2018) -		\$		- \$
	****		\$		- \$
	For the calendar year before that:		\$ 0.00		s
	(January 1 to December 31,2017		\$		\$
	YYYY -				. . .

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Debtor 1	Tawanda First Name	LaShawn Middle Name	Luckey Last Name		Case nur	ntber (if known)	
Part 3:	List Certa	in Payments	You Made Be	fore You Filed	for Bankruptcy		
6. Are ei	ther Debtor 1	's or Debtor 2'	s debts primarily	/ consumer debt	s?		
□ No	"incurred by	y an individual p	primarily for a per	sonal, family, or h	bts. Consumer debts are obusehold purpose." by any creditor a total of \$6	defined in 11 U.S.C. § 101 6,425* or more?	(8) as
	Mo. Go	to line 7.					
	tot ch	al amount you ild support and	paid that creditor. alimony. Also, do	Do not include pa not include paym	66,425° or more in one or syments for domestic supp ents to an attomey for this at for cases filed on or afte	oort obligations, such as s bankruptcy case.	
Ø Ye	es. Debtor 1 o	r Debtor 2 or b	oth have primari	ily consumer det	ots.		
					y any creditor a total of \$6	600 or more?	
	No. Go	to line 7.					
	cre	editor. Do not in	clude payments f	or domestic suppo	6600 or more and the total ort obligations, such as ch y for this bankruptcy case	ild support and	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor			01/15/2018	\$1,194.00	\$22,062.00	☐ Mortgage ☑ Car
		Street	Parkway	02/15/2019			Credit card Loan repayment
	Atlan City	ta (Ga 30339 te ZIP Code				Suppliers or vendors Other
	Creditor	s Name			\$	\$	☐ Mortgage
	Number	Street					Credit card Loan repayment
	City	Sta	te ZIP Code				Suppliers or vendors Other
	J.,	J.					
	Creditor ²				\$	\$	☐ Mortgage ☐ Car ☐ Credit card
	- Notitibet	Jueer					Loan repayment Suppliers or vendors
	C**	A	700-4-	_			☐ Other

City

ZIP Code

State

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1	Tawanda	LaShawn	Luckey			Case number (# Imoun	
	First Name	Middle Name	Last Name		_		
Vithi n	1 year before	e you filed for I	bankruptcy, did	you make a pay	ment on a debt y	you owed anyone v	who was an insider?
							th you are a general partner,
corpor	rations of whicl	h you are an offi	icer, director, per	son in control, o	r owner of 20% or	more of their voting	securities; and any managing
agent,	including one	for a business y	you operate as a	sole proprietor.	11 U.S.C. § 101. I	nclude payments fo	r domestic support obligations,
such a	as child suppor	t and alimony.					
2 No							
			_				
∟ Ye	s. List all payn	nents to an insid	ler.				
				Dates of	Total amount		Reason for this payment
				payment	paid	Owe	
					_		
In	nsider's Name			_	\$	- \$	
_							
N	lumber Street						
_							
_				_			
С	City	St	ate ZIP Code				
					\$	_ \$	
In	nsider's Name						
_							
N	umber Street						
_							
_				_			
C	aty .	St	ate ZIP Code				
ZÍ No	e payments on	-	ed or cosigned b	y an insider.			
⊿ Yes	s. List all paym	ents that benef	ited an insider.				
				Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	OM6	Include creditor's name
1-	pidade Nama				\$	_ \$	
IU	sider's Name						
_							
Nt	umber Street						
_							
_				_			
Ci	ity	Sta	ite ZIP Code				
					\$	s	
in	sider's Name				▼	·	
_				_			
Nu	umber Street						
_							
Ci	ity	Sta	te ZIP Code	-			

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or 1	Tawanda First Name	LaShawn Widdle Name	Luckey Last Name			Case numb	er (#Imown)		
ırt 4:			, Repossession						
List all and co	such matters, intract dispute	including pers			-	suit, court action, orces, collection suit			port or custody modific
2 No	s. Fill in the de	atoile							
_ 16.	3. 1 III II DIE GE	stans.	Natur	e of the cas	ie .	Court or agenc	y		Status of the ca
c	aaa tida								Pending
C	ase title					Court Name			On appear
-						Number Street			Concluded
Ca	ase number					City	State	ZIP Code	
Ca	ase title					Court Name			Pending
_						Number Street			On appeal Concluded
C	ase number					Number Gude			_ 00/10000
		_				City	State	ZIP Code	
_ `	. Go to line 1 s. Fill in the inf	r. formation below	1 .	Descri	be the property			Date	Value of the prope
	Creditor's Name	e		_					s
	Number Stre	at .		Evoluin	n what happened				
	Walled Obc			•	roperty was rep				
				_ _ P	roperty was fore	eclosed.			
	City	91	tate ZIP Code	_	roperty was gar	nished. Iched, seized, or lev	iad		
	City	31	ale Zir Code		be the property	iched, scized, of ice	ileu.	Date	Value of the prop
									s
	Creditor's Name	9		_					- •
	Number Stre	et		_ Explair	n what happened				
				_ □ P	roperty was rep	ossessed.			
					roperty was fore				
	<u> </u>			_ 🔲 PI	roperty was gan	nished.			

☐ Property was attached, seized, or levied.

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T 1	Tawanda	LaShawn	Luckey	Case nu	mber (if known)	
	First Name	Middle Name	Last Nar	Ne .		
A	in 90 dave hof	ora vou filed fo	e hanknint	ry, did any creditor, including a bank or finan	cial institution, set off any am	ounts from your
				se you owed a debt?	cial Resolution, set on any and	iounis iroin you
ZÍ N				•		
	es. Fill in the de	etails.				
				Describe the action the creditor took	Date action was taken	Amount
ā	reditor's Name					
						_
N	umber Street					\$
_						
<u></u>	ity	State Z	7iP Code	Last 4 digits of account number: XXXX		
	,	020	a. 0000		- — —	
With	in 1 year hefor	e vou filed for I	hanknintes	, was any of your property in the possession	of an assignee for the benefit	t of
				dian, or another official?	o. all coorgines for the belief	,
Ø N		• •		•		
	_					
rt 5:	List Certa	in Gifts and C	Contributi	ons		
	<u> </u>		·			
Afirhi	n 2 waare bafa	m you filed for	hankounte	r, did you give any gifts with a total value of r	more than \$600 per person?	
M N	_	ie you med ioi	Deliki upac	, did you give any give with a total value of t	note than 4000 per person:	
	-		••			
– 1	es. Fill in the de	etails for each gi	M.			
	Ciffe with a total	value of more th	on tean	Describe the gifts	Dates you gave	Value
	per person	value of filore of	iaii 4 000	Describe the gira	the gifts	Value
						\$
Pe	erson to Whom You	Gave the Gift				Φ
						s
_						•
<u> </u>	mber Chart					
N	umber Street					
~		State Z	ND Codo			
Cit	ıy	Swatte Z	ar C 008			
Pe	erson's relationsh	ip to you				
		value of more than	n \$600	Describe the gifts	Dates you gave	Value
pe	er person				the gifts	
						_
Pe	erson to Whom You	Gave the Gift				\$
_						\$
<u> </u>	umber Street					
NL	ninger Street					
_						
Cit	ty	State Z	IP Code			
Pe	erson's relationsh	ip to vou				

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otor 1	Tawanda	LaShawn	Luckey	Case number (ii known)_		
	First Name	Middle Name	Last Name			
. Withi	n 2 years befor	re you filed for	bankruptcy, di	id you give any gifts or contributions with a total valu	e of more than \$6	00 to any charity?
ØΝ	-					
□ Y	es. Fill in the de	etails for each gi	ift or contribution	n.		
	Gifts or contribut		Des	cribe what you contributed	Date you	Value
1	that total more th	ıan \$600			contributed	
C	harity's Name					\$
						S
						·—————
No	umber Street					
Cir	ty State	ZIP Code				
2 6	Liet Corte	in Losses				
art 6:	LIST OF ICE	III CO3303				
	Describe the prop now the loss occ		Inclu	cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending insurance ns on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
						\$
art 7:	List Cortain	n Payments (or Transfers			
	·			Lyon or anyone also acting an your behalf any or trans	efor one property	to one
you c	consulted abou	t seeking bank	cruptcy or prep	l you or anyone else acting on your behalf pay or tran aring a bankruptcy petition?	isiei ally property	to allyone
		s, bankruptcy pe	etition preparers	, or credit counseling agencies for services required in yo	our bankruptcy.	
Ø No		4-10-				
U Ye	es. Fill in the de	tails.		•		
			Des.	cription and value of any property transferred	Date payment or transfer was	Amount of paymer
P	Person Who Was Pa	id			made	
-	lumber Street					•
,						₹
-						\$
7	City	State ZIF	Code			
	-					
Ē	mail or website addr	1988				
F	Person Who Made th	e Payment, if Not Yo	<u>u</u>			

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First Name Middle Name Las	Key K Name	Case number (if Immun)_		
	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			_
Number Street	-			\$
	-			\$
City State ZIP Code	-			
Email or website address	_			
Person Who Made the Payment, if Not You				
A No Yes. Fill in the details.	Description and value of any property	transferred	Date payment or transfer was	Amount of pay
Person Who Was Paid	-		made	
Number Street	-			\$
	-			\$
City State ZIP Code	-			
fithin 2 years before you filed for bankrup	business or financial affairs?			
ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you ha No Yes. Fill in the details.				, , ,,
clude both outright transfers and transfers on one include gifts and transfers that you ha		Describe any property or debts paid in excha		
clude both outright transfers and transfers on one include gifts and transfers that you ha	we already listed on this statement. Description and value of property			Date transf
clude both outright transfers and transfers in onot include gifts and transfers that you han No No Yes. Fill in the details.	we already listed on this statement. Description and value of property			Date transf
clude both outright transfers and transfers to not include gifts and transfers that you han No Yes. Fill in the details. Person Who Received Transfer	we already listed on this statement. Description and value of property			Date transl
clude both outright transfers and transfers in onot include gifts and transfers that you hat No Yes. Fill in the details. Person Who Received Transfer Number Street	we already listed on this statement. Description and value of property			Date transf
clude both outright transfers and transfers in onot include gifts and transfers that you had not gift gifts gifts gifts and gifts	we already listed on this statement. Description and value of property			Date transf
clude both outright transfers and transfers in onot include gifts and transfers that you hat No No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	we already listed on this statement. Description and value of property			Date transf
clude both outright transfers and transfers in onot include gifts and transfers that you had not include gifts and transfer not include gifts and transfers that you had not include gifts and transfers that you	we already listed on this statement. Description and value of property			Date transf

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Debtor 1	Tawanda Frst Name	LaShawn Midde Name	Luckey Last Nam		Case number (if lo	Oun)	
	•	_	•	cy, did you transfer any proper	ty to a self-settled trus	st or similar device of v	vhich you
are Zí	_	(i nese are onen	called asse	et-pratection devices.)			
_	Yes. Fill in the d	etails.					
				Description and value of the prope	erty transferred		Date transfer was made
	Name of trust						
Part 8	List Certai	n Financial A	ccounts, I	instruments, Safe Deposit	Boxes, and Storag	e Units	
				, were any financial accounts (benefit,
clo	sed, sold, move	d, or transferre	d?	other financial accounts; certi			
	•	• •	-	res, associations, and other fir	•	nes in Danks, Cledit un	iioiis,
Ø							
u	Yes. Fill in the	details.					
				Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial	Institution		XXXX-	Checking		s
	Number Street				Savings		·
					☐ Money market		
					☐ Brokerage		
	City	State Zif	P Code		☐ Other		
				xxxx	Checking		\$
	Name of Firencial	institution			☐ Savings		
	Number Street				Money market		
					☐ Brokerage		
	City	State ZF	Code		☐ Other		
24 Do	•			ar before you filed for bankrup	ntou amu aafa damaait	hay as ather democitan	. for
sec	urities, cash, or			ar beibre you nied for bankrup	ncy, any sale deposit	box or other depositor	y tor
Ø	-						
u ·	Yes. Fill in the (details.		Who else had access to it?	Describe th	a contents	Da a411
				THIN ease neu alvess to it:	Describe til	e contents	Do you still have it?
							□ No
	Name of Firancial	Institution		Name			Yes
	Number Street			Number Street			
			<u>_</u>	City State ZIP Code			
	City	State ZF		City State ZIP Code			

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Debtor 1	Tawanda Fist Name	LaShawr Middle Name	n Luck	Cey Name	Ca	se number (if known)	
22. Have		perty in a st	lorage unit	or place other than your hor	ne within 1 yea	r before you filed for bankrup	otcy?
-	es. Fill in the d	etaiis.		Who else has or had access	to it?	Describe the contents	Do you still have it?
	Name of Storage F	acility		Name			☐ No ☐ Yes
	Number Street			Number Street			
	024		7770.4	City State ZIP Code			
Part 9	City Identify	State Property	ZIP Code You Hold (or Coatrol for Someone l	Else		
23. Do	you hold or con nold in trust for	trol any pro				ou borrowed from, are storin	g for,
_	No Yes. Fill in the d	letails.					
				Where is the property?		Describe the property	Value
	Owner's Name						\$
	Number Street			Number Street		- -	
				City State	z ZIP Code	-	
Part 1	City Give De	State	ZIP Code	neatel information			
For the	purpose of Par	t 10, the foll	owing defi	nitions apply:			
haz	ardous or toxic	substances	, wastes, o		oil, surface wa	pollution, contamination, rel ter, groundwater, or other me s, or material.	
Site	means any loca	etion, facility	y, or proper	•		whether you now own, open	ate, or
Haz	ardous material	means any	thing an en			ste, hazardous substance, to	oxic
	•			that you know about, regard		hey occurred.	
24. Has	any governmen	tal unit noti	fied you tha	nt you may be liable or poten	tially liable und	ler or in violation of an enviro	onmental law?
	No Yes. Fill in the d	etails.					
				Governmental unit	Environn	nental law, if you know it	Date of notice
ī	Name of site			Governmental unit			
i	Number Street			Number Street			
-				City State ZIP Co	de		
7	City	State	7IP Code				

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ebtor 1	Tawanda	LaShawn	Luck	,	Case numbe	(if known)	
	First Name	Middle Name	Læst	Name			
5. Hav	e you notified a	ny government	al unit of	f any release of hazardous ma	aterial?		
Ø	No						
	Yes. Fili in the o	details.					
				Governmental unit	Environmental la	w, if you know it	Date of notice
	Name of site			Governmental unit			
	Number Street			Number Street			
				City State ZIP Cod	<u></u>		
				J.,	-		
	City	State ZI	P Code				
	>						
_	•	irty in any juok	iai or ad	ministrative proceeding unde	r any environmental t	aw? include sewemend	and orders.
U,	Yes. Fill in the o	details.					O. A 544 .
				Court or agency	Nature of the	e case	Status of the case
	Case title						
	Case due		-	- Court Name			Pending
							On appeal
•				- Number Street			☐ Concluded
;	Case number			- City State Z	P Code		
				,			
art 1				niness or Connections to A vicy, did you own a business		owing connections to a	ny business?
	_	-	_	in a trade, profession, or othe	-	_	•
(A member o	f a limited liabi	lity com	pany (LLC) or limited liability	partnership (LLP)	-	
	A partner in						
(🗖 An officer, d	lirector, or man	aging ex	ecutive of a corporation			
(An owner of	at least 5% of	the votin	g or equity securities of a co	rporation		
	No. None of the			art 12. in the details below for each	husiasse		
_	i es. Check all d	ilat apply acce	e and iiii	Describe the nature of the bus		Employer Identification (number
						Do not include Social Se	
	Business Name						-
						EIN:	
	Number Street			Name of accountant or brinkly	torus e	Dates business existed	
						From To	
	City	State ZI	P Code				
	•			Describe the nature of the bus	siness	Employer Identification r	number
	Business Name					Do not include Social Se	curity number or ITIN.
	Manual Company					EIN:	
	Number Street			Name of accountant or brookly	№ере 7	Dates business existed	
						From To .	
	City	State 71	P Code				,

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	e number (# knows)
Describe the nature of the business	Employer Identification number
	Do not include Social Security number or ITIN
	
	EIN:
	
Name of accountant or bookkeeper	Dates business existed
<u></u>	
	_
	From To
Date issued	
2510 100000	
was a second	
MBM / DD / YYYYY	
	
_	
<u> </u>	
	ment for up to 20 years, or coor.
KKI 🐷	
// ~	
Signature of Debtor 2	
/	
Date	
	e Siling for Realmenton (Official Source 48712
Date ur Statement of Financial Affairs for Individuals	s Filing for Banleruptcy (Official Form 107)?
	s Filing for Bankruptcy (Official Form 107)?
	s Filing for Bankruptcy (Official Form 107)?
	s Filing for Bankruptcy (Official Form 107)?
	s Filing for Banleruptcy (Official Form 107)?
ur Statement of Financial Affairs for Individuals	
ur Statement of Financial Affairs for Individuals	
	Describe the nature of the business Name of accountant or bookkeeper Date issued Date issued Date issued Name of Financial Affairs and any attachments, stand that making a false statement, concealing can result in fines up to \$250,000, or imprisont.

				<u> </u>
Case numbe (If known)	r			
United States	Bankruptcy Court for	the: Southern District o	of Ohio	
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	
Dedicin	First Name	Middle Name	Last Name	
Fill in this	Tawanda	ntify your case: LaShawn	Luckev	

Check one box only as directed in this form and in Form 122A-1Supp:	
1. There is no presumption of abuse.	
 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2). 	
3. The Means Test does not apply now because of qualified military service but it could apply later.	

☐ Check if this is an amended filing

Column B

y Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

h -			
-	46	-	

Calculate Your Current Monthly Income

What is your marital and filing status? Check one only

1. What is your marian and ming status? Officer one only.	
Not married. Fill out Column A, lines 2-11.	
☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.	
☐ Married and your spouse is NOT filing with you. You and your spouse are:	
Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.	
Living separately or are legally separated. Fill out Column A. lines 2-11; do not fill out Column B. By checking this box.	vou declare

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

under penalty of penjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your

		Debtor 1	non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>2,645.30</u>	\$
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ _400.00	s
5 .	Net income from operating a business, profession, or farm Gross receipts (before all deductions) Debtor 1 Debtor 2 \$ 0.00 \$		
	Ordinary and necessary operating expenses - \$_0.00 - \$		
	Net monthly income from a business, profession, or farm $\frac{$0.00}{$}$	\$0.00	\$
6.	Net income from rental and other real property Gross receipts (before all deductions) Debtor 1 Debtor 2 \$		
	Ordinary and necessary operating expenses -\$_0.00-\$		
	Net monthly income from rental or other real property \$ 0.00 copy	\$0.0 0	\$
7 .	Interest, dividends, and royalties	\$ 0.00	\$

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bior 1	Tawanda First Name Middle Nam	LaShawn Last Name	Luckey =	Case r	number (#Imawn)_		
					umn A tor 1	Column B Debtor 2 or non-filing spous	e
Unemplo	yment compensatio	n		\$	0.00	\$	
		contend that the amour		<u> </u>			-
	=	Instead, list it here:					
-	•						
	or retirement incom nder the Social Securi	e. Do not include any ar ity Act.	nount received that was	a \$_	0. 00	\$	-
Do not in as a victi	clude any benefits rec m of a war crime, a cri	es not listed above. Specived under the Social ime against humanity, o er sources on a separate	Security Act or payments rinternational or domes	s received tic			
				\$_	0.00	\$	-
				\$_	0.00	\$	
Total an	nounts from separate	pages, if any.		+ \$_	0.00	+\$	-
		monthly income. Add li Column A to the total fo		th \$_	3,045.30	+ s	= 3,045.3
art 2: 0	etermine Whetbe	r the Means Test A	oplies to You				monthly income
Calculate	your current month	ly income for the year	Follow these stens:				
	-	nonthly income from line	•		Ca	ppy line 11 here	\$ 3,045.30
		er of months in a year).				•••	x 12
		income for this part of t	he form			12b.	\$ 36,543.60
	-	•				120.	V. <u>UU.U.IU.UU</u>
. Calcul at e	e the median family i	ncome that applies to	you. Follow these steps	Si.			
Fill in the	state in which you live	е.	ОН				
Fill in the	number of people in y	our household.	2			_	
		e for your state and size an income amounts, go				13.	\$ 36,036.00
instruction	ns for this form. This li	ist may also be available	e at the bankruptcy clerk	's office.			
How do t	the lines compare?						
	Line 12b is less than o Go to Part 3.	or equal to line 13. On th	e top of page 1, check t	ox 1, <i>There is r</i>	no presumption	n of abuse.	
	Line 12b is more than Go to Part 3 and fill ou	line 13. On the top of part at Form 122A2.	age 1, check box 2. The	presumption of	abuse is dete	rmined by Form 122	A-2.
art 3:	Sign Below	•					
				Abi4-4		Manhananta 1- A-	
6	v signing here, i decia	re under penalty of peri	ury that the information (on this statemen	nt and in any a	ittachments is true a	па соггест.
•	A amount	my			-10-1: -		
	Signature of Debtor 1	limi		Signature	of Debtor 2		
	Date 3 / L	**)		Date	I DD IYYYY	_	
	If you chacked line	14a. do NOT fill out or fi	lo Form 1224 2				

If you checked line 14b, fill out Form 122A-2 and file it with this form.